## UNITED STATES POSTAL SERVICE OFFICIAL BUSINESS

## SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

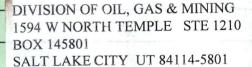


RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.



Halandan Halalah balah madilan dilan di

## P 074 976 739

## RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

| (See Reverse)  |             |
|--|-------------|
| Sent to KEITH CARPENTER                                    |             |
| Street an74910 CHATEAU CIR                                 |             |
| P.O., State and ZIP Code<br>INDIAN WELLS CA 92216          |             |
| Postage  | S           |
| Certified Fee  | Charles and |
| Special Delivery Fee                                       |             |
| Restricted Delivery Fee                                    | - 1-1-11    |
| Return Receipt showing to whom and Dan DANG                | - 1         |
| Return Reveipt spewing to<br>Date, and Address of Delivery |             |
| TOTAL Postable and Fees 1999                               | 6           |
| Postmark or Date Son   |             |
| 8-8419   |             |

S/027/048

7/9/99

PS Form 3800, June 1985